

Knollwood Energy of MA LLC P.O. Box 30 Chester, New Jersey 07930

NHPUC OFEB'15am11:22

January 29, 2015

Debra A. Howland Executive Director New Hampshire Public Utilities Commission 21 South Fruit Street, Suite 10 Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find the application for the Eric Simon system to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506.

Customer and Facility Information
Eric Simon
30 Tubbs Hill Road
Deering, NH 03244
603.464.4023
ejs@ericjsimon.com

The Nepool GIS ID # for this facility is: NON44972. Also enclosed are the Simplified Process Interconnection Application and Service Agreement and the Certificate of Completion for Simplified Process Interconnections. An electronic version has been sent to executive.director@puc.nh.gov.

Please do not hesitate to contact me if you have any questions regarding this application.

Thank you for your consideration,

Linda Modica New England REC Operations Manager *Knollwood Energy of MA LLC* 973.879.7826 linda@knollwoodenergy.com

Enclosures (3)



State of New Hampshire Public Utilities Commission



21 S. Fruit Street, Suite 10, Concord, NH 03301-2429

DRAFT APPLICATION FORM FOR RENEWABLE ENERGY CERTIFICATE (REC) ELIGIBILITYFOR CLASS I AND CLASS II SOURCES WITH A CAPACITY OF 100 KILOWATTS OR LESS

Pursuant to New Hampshire Administrative Code Puc 2500 Rules including Puc 2505.08, Certification of Certain Customer-Sited Sources

- Please submit one (1) original and two (2) paper copies of the completed application and cover letter* to:
 Debra A. Howland, Executive Director, New Hampshire Public Utilities Commission

 21 South Fruit Street, Suite 10, Concord, NH 03301-2429
- Send an electronic version of the completed application and the cover letter electronically to executive.director@puc.nh.gov.
- The cover letter must include complete contact information and identify the renewable energy class for which the applicant seeks eligibility. Pursuant to Puc 2505.01, the Commission is required to render a decision on an application within 45 days of receiving a completed application.

If you have any questions please contact Barbara Bernstein at (603) 271-6011 or Barbara.Bernstein@puc.nh.gov.

 Photovoltaic (PV) solar facilities are Class II resources. 	Contact Barbara.Bernstein@puc.nh.gov for assistance.
Eligibility Requested for: Class I Class II	x☐ Check here X☐ if this facility part of an aggregation.
If the facility is part of an aggregation, please list the aggre	egator's name. Knollwood Energy of MA
 Provide the following information for the owner of the 	PV system.
Applicant Name Eric Simon	Email ejs@ericjsimon.com
Address 30 Tubbs Hill Road	City Deering State NH Zip 03244
Telephone _603.464.4023	Cell
 For business applicants, provide the facility name and of information). 	contact information (if different than applicant contact
Facility Name Prim	ary Contact
Address	City State Zip
Telephone	Cell
Email address:	

		ete list of the equipment unverter. Your facility will n		_	_	EC me	ter, ar	nd, if
equipment	quantity	Туре	equipment	quantity	Туре			
PV panels	48	Solar pv LG270	other				э.	
Inverter	48	Enphase M250	other			man de Maryaman ayan m		and a second control of the second control o
meter	1	Sangamo J5S 30TA	other			****		
must be For PSN Comple	included IH custom tion are r	erconnection agreement a description of the series of the	rocess Interconnect	ion Applic	ation and Exhibit B -	Certi		
		tial date of operation (the o					15/14	
	d directly	e, license number and cont by the customer. Lights Solar		the instal	ler, or indicate that the second seco	# (if	quipme	ent was
Address	96 Hill	liard Road	City Ch	nichester	State:	N H	Zip	03258
Telepho		3.961.0045	email		@blsus.com		'P	
If the eq	uipment	was installed directly by the	customer, please	check here	:			Participation of the Control of the
Provide	the name	e and contact information	of the equipment v	endor.				
□ <i>x</i>	Check I	here if the installer provided	d the equipment an	d proceed	to the next question.			
Business	Name		Cor	ntact				
Address			City _		State		Zip	
Telepho	ne		email					
f an ind	ependen	t electrician was used, plea	ase provide the foll	owing info				
	an's Name	e Chris Ward			ense# 8585M			

Email

wardelectricllc@yahoo.com

Business Name

Ward Electric

	Address 13	French Circle	City	Pittsfield	State	<u>NH</u> Z	ip 03263
•		me of the independent monitor for tl p://www.puc.nh.gov/Sustainable%20					
	Independent M	lonitor's Name Paul Button Energy	Audits	Unlimited			
		rtified under another state's renewab rovide proof of the certification as Att			yes 🗌	no 📑	X
	following in In order to	, if your facility is part of an aggregat formation. qualify your facility's electrical produ er with the NEPOOL – GIS. <i>Contact in</i>	ction fo	r Renewable Ene	rgy Certificates	(RECs), y	
		Jame	es Web	b			
		Registry Administrator,					
		224 Airport Parkway, Su			110		
	If you are not n	Office: 408.517.217		webb@apx.com	C fo eilite e e el e		
	ii you are not p	art of an aggregation, Mr. Webb will a	issist yo	u iii obtaining a c	iis racility code.		
	GIS Facility Cod	le# NON44972	A	sset ID # NON	144972		
	in conformand or provide a se	affidavit by the applicant or qualif ce with any applicable state/local eparate document. on requires a notarized affidavit a	buildir	ng codes. Use	either the foll		
	AFFIDAVIT						
	The Undersign	ed applicant declares under penal	ty of p	erjury that the p	roject is insta	lled and	operating
	in conformand	e with all applicable building code	s. (ple	ase see attached	d)		
	Applicant's Sign	ature			Date		
	Applicant's Prin	ted Name Linda Modica			-		
	Subscribed and	sworn before me this	. Day	of	(month) in t	he year	
	County of		St	tate of			
				Notary Public/Ju	ustice of the Pe	ace	
		My Commission Evnires					

- Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following affidavit form or provide a separate document.
- The Commission requires a notarized affidavit as part of the application.

							-
AFFIDAVIT							
		applicant declares under penalty coith all applicable building codes.	of perjury th	nat the pi	roject is	s installed and o	pperating
Applicant's S	ignatu	re			Date	1/30/15	
Applicant's P	rinted	Name Linda Modica		· · · · · · · · · · · · · · · · · · ·			
Subscribed a	nd swo	orn before me this I	Day ofJan	nuary	_ (mon	th) in the year	2015
County of	Morri	S	State of	New Je	rseÿ		
	-	SYLVIA A. SMITH Notary Public State of New Jersey	ANALYSIA Ana	Syl	2	AR	il
		My Commission Expires Jan. 6, 2019 I.D.# 2309220	Notary	Publik/Ju:	stice of	the Peace	
	,	My Commission Expires	-	70777			

• Complete the following checklist. If you have questions, contact barbara.bernstein@puc.nh.gov.

CHECK LIST: The following has been included to complete the application:	YES
All contact information has been provided.	X
 A copy of the interconnection agreement. PSNH Customers should include both the Interconnection Standards for Inverters Sized up to 100 KVA and Exhibit B – Certification of Completion for Simplified Process Interconnection. 	x
 Documentation of the distribution utility's approval of the installation.* 	Х
 If the facility is participating in another state's renewable portfolio standard (RPS) program, documentation of certification in other state's RPS. 	
A signed and notarized attestation.	х
A GIS number obtained from the GIS Administrator.	х
The document has been printed and notarized.	х
 The original and 2 copies are included in the packet mailed to Debra Howland, Executive Director of the PUC. 	х
An electronic version of the completed application has been sent to executive.director@puc.nh.gov .	х
*Usually included in the interconnection agreement.	

• If the application has been prepared by someone other than the applicant, complete the following. If the application was prepared by the applicant, check here

and skip this section.

PREPARER'S INFORMATION

Preparer's Name Linda Modica	Email address: <u>linda@knollwoodenergy.com</u>
Address PO Box 30	City Chester State NJ Zip 07930
Telephone 973.879.7826	Cell
Preparer's Signature:	

PSNH Project ID # N 3/50

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE INTERCONNECTION STANDARDS FOR INVERTERS SIZED UP TO 100 KVA

SEP 16 2014

SESD

Simplified Process Interconnection Application and Service Agreement

Date Prepared:	3/14
Contact Information:	()
Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)	
Customer or Company Name (print): ENC SYMON	
Contact Person, if Company:	
Mailing Address: 30 Tubbs IIII ROAP	_
City: Deen N State: NH Zip Code:	77744
The state of the s	
Facsimile Number: E-Mail Address: E55 (P e514)	isinon? com
racsimile Number: E-Mail Address: 23 9 P 26 12 3	- Sime is a second
A Control of Control of Control in the Marine control of the Control of Contr	intols
Alternative Contact Information (e.g., System installation contractor or coordinating company, if appropri	ate):
Name: 96 Hilliard Road	
Produing Addition.	
City: Zip Code: Zip Code:	
Telephone (Daytime): (Evening):	
Facsimile Number: E-Mail Address:	
Electrical Contractor Contact Information (if appropriate):	
Name: Chels warm	
Mailing Address: B FRENCH Ciecle	
City: Kt Stell State: Zip Code:	32263
Telephone (Daytime): 403-396-0945 (Evening):	
Facsimile Number: E-Mail Address: Worde Letwill C	6 upho won
	\mathcal{J}^{-1}
Facility-Site-Information:	
Facility (Site) Address: Same above	
City: State: NH Zip Code:	
Florida	526617984 V
Service Company: PSNH Account Number: 56083051086 Meter Number:	755211007
Non-Default' Service Customers Only:	
Competitive Electric	
Energy Supply Company: Account Number:	
(Customer's with a Competitive Energy Supply Company should verify the Terms & Conditions of their con	to a state of the
Supply Company.)	tract with their Energy
Facility Machine Information:	CONFUA
1 601	40 1010
	26
The state of the s	Quantity:
Nameplate Rating: (kW) (kVA) (AC Volts) Phase: Si	ngle Three
System Design Capacity: (kW) (kVA) Battery Backup: Yes No	
Net Metering: If Renewably Fueled, will the account be Net Metered? Yes No	
Prime Mover: Photovoltaic Reciprocating Engine Fuel Cell Turbine Other	Andrew Control of the
Energy Source: Solar Wind Hydro Diesel Natural Gas Fuel Oil Other	William Control of the Control of th

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PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE INTERCONNECTION STANDARDS FOR INVERTERS SIZED UP TO 100 KVA

Simplified Process Interconnection Application and Service Agreement

✓	Inverter-based Generating Facilities: UL 1741 / IEEE 1547.1 Compliant (Refer To Part Puc 906 Compliance Path For Inverter Units, Part Puc 906.01 Inverter Requirements) Yes No No
	The standard UL 1741.1 dated May, 2007 or later, "Inverters, Converters, and Controllers for Use in Independent Power Systems," addresses the electrical interconnection design of various forms of generating equipment. Many manufacturers choose to submit their equipment to a Nationally Recognized Testing Laboratory (NRTL) that verifies compliance with UL 1741.1. This term "Listed" is then marked on the equipment and supporting documentation. Please include, any documentation provided by the inverter manufacturer describing the inverter's UL 1741/IEEE 1547.1 listing.
2.	External Manual Disconnect Switch: An External Manual Disconnect Switch shall be installed in accordance with 'Part Puc 905 Technical Requirements For Interconnections For Facilities, Puc 905.01 Requirements For Disconnect Switches and 905.02 Disconnect Switch.' Yes No No THE IZEW SYSTEM REQUIRES AN Location of External Manual Disconnect Switch: EXTERNAL AC DISCONNECT SWITZH As TER PART PUC 905. Project Estimated Install Date: Project Estimated Inservice Date:
3 7	Project Estimated Install Date: Project Estimated In-Service Date: Interconnecting Customer Signature: I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions for Simplified Process Interconnections attached hereto: Customer Signature:
<i>X</i> 	Please include, a one-line and/or three-line drawing of proposed installation For PSNH Use Only
	Approval to Install Facility: Installation of the Facility is approved contingent upon the Terms and Conditions For Simplified Process Interconnections of this Agreement, and agreement to any system modifications, if required. Are system modifications required? Yes No To be Determined Title: SR. Engine ER Date: 9-16-14
	THE PROPOSED 9KW System is AUTHORIZED APPROVED TO INTERCONNECT ON THE EXISTING 10 KVA TRANSFORMER FEED MAG, RESIDENCE. PLEASE NOTE AND FUTURE EXPANSION AND/OR ADDITIONS WILL BE LIMITED TO IKW. THE IDKW SYSTEM IS AUTHORIZED APPROVED TO INTEL CONNECT ON THE EXISTING 25 KVA TRANSFORMER— CONFIRMED TRANSFORMER WAS PREVIOUSLY CHANGED OUT TO A 25 KVA: Page 2 of 3

DocuSign

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The state estimated to the telephone of the two KVA

Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information: Check if owner-installed
Customer or Company Name (print) Eric Simon
Contact Person, if Company:
Mailing Address 30 /0 bbs /-/// Rd
City: Deeving State: WH Zip Code 0320
Telephone (Daytime): 464-4023 (Evening):
Facsimile Number: E-Mail Address: EJS @ Pric JSIMon. Co.
Facility Information:
Address of Facility (if different from above):
City: State: Zip Code
Electrical Contractor Contact Information:
Electrical Contractor's Name (if appropriate). Chris
Mailing Address: 15 For 1 Ch Circle
City: $P + S + (P + D)$ State: $P + S + (P + D)$ Zip Code. $O3263$ Telephone (Daytime): (603) 396-70945
Telephone (Daytime): (603) 396-0945 (Evening):
Facsimile Number: E-Mail Address Wavdelectric //co ye
License number: 8585
Date of approval to install Facility granted by the Company:
PSNH Application ID number: #N
Inspection:
The system has been installed and inspected in compliance with the local Building/Electrical Code of
City: Descing County: Hills borough
Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection).
Signature: U22
Name (printed): Michael E BORDEN Date: 10-15-14
Customer Certification:
I hereby certify that, to the best of my knowledge, all information contained in this Exhibit B - Certification of Completion is true and correct. This system has been installed and shall be operated in compliance with applicable standards. Also, the initial start-up test required by Puc. 905.04 has been successfully completed
Customer Signature:
As a condition of interconnection you are required to send/fax a copy of this form to